

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTHState File No. 387 ¹⁵²
Registered No. 387

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village P.O. Box 1461 Miami
City Miami No. 6 Live Oak Mine St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)
(If child is not yet named, make supplemental report, as directed.)

2. Full name of child

Leila Carol Jennings3. Sex of Child
FemaleTo be answered ONLY
in event of plural
births.

4. Twin, triplet or other.

5. No., in order of birth.

6. Legitimate?

yes

7. Date

of birth June 7 - 1930
Month Day Year

8.

FATHER

Full name

Lawrence A. Jennings

9. Residence

(Usual place of abode)

Miami

If non-resident, give place and state.

Arizona

10. Color or race

Cauc.11. Age at last birthday 25 (Years)

12. Birthplace (city or place)

(State or country)

Mangan Okla.

13. Occupation

Crane man

Nature of Industry

Insp. Con. Copper Co.

14.

MOTHER

Full maiden name

Leila Pearl Wakein

15. Residence

(Usual place of abode)

Miami

If non-resident, give place and state.

Arizona

16. Color or race

Cauc.17. Age at last birthday 25 (Years)

18. Birthplace (city or place)

(State or country)

Colonia Dublin Mexico

19. Occupation

Nature of Industry

Housewife

20. Number of children of this mother.

(Taken as of time of birth of child herein
certified and including this child.)3

(a) Born alive and now living

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against ophthalmia neonatorum?

yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 7:45 A. M. on the date above stated.
(Born alive or stillborn)

Signature

Lyril M. Brown

(Physician or midwife)

*When there was no attending physician
or midwife, then the father, householder,
etc., should make this return. A stillborn
child is one that neither breathes nor
shows other evidence of life after birth.Given name added from
a supplemental report.

Month, day, year

Address

Miami, ArizonaFiled June 15, 1930

Registrar.

Registrar.

312-607-365